

**CITY OF GROVE
FARMER'S MARKET
APPLICATION**

Farmer's Market Representative: _____

Representative Phone No.: _____
(Representative must be available via phone during the event)

Farmer's Market Location: _____

Farmer's Market Dates: _____

Number of Vendors participating: _____

Number of Vendors registered with the OK Tax Commission and are collecting sales tax: _____

Number of Vendors exempt from payment of sales tax: _____

Each participating Vendor shall submit a Vendor Application. The Organization shall provide each participating Vendor with an Identification Tag and each Vendor shall display the ID Tag during the entire event. Vendors without an ID Tag will not be allowed to participate in the Special Event.